

BEST AVAILABLE COPY

MULTIPLE DEPEN.
CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10560876

FILING DATE
12.12.05

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	2					
TOTAL DEP.	17	↔	↔	↔	↔	↔
TOTAL CLAIMS	19	████████	████████	████████	████████	████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
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TOTAL IND.						
TOTAL DEP.		↔	↔	↔	↔	↔
TOTAL CLAIMS		████████	████████	████████	████████	████████